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Bib Data Sheet

CONFIRMATION NO. 1762

SERIAL NUMBER 09/944,098	FILING DATE 09/04/2001 RULE	CLASS 369	GROUP ART UNIT 2651	ATTORNEY DOCKET NO. 041514-5143
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APPLICANTS

Masakazu Ogasawara, Tsurugashima-shi, JAPAN;
 Hajime Koyanagi, Tsurugashima-shi, JAPAN;

** CONTINUING DATA *****

None *GR*

** FOREIGN APPLICATIONS *****

Yes

JAPAN 2000-272090 09/07/2000
 JAPAN 2000-272091 09/07/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/03/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 26	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>UR</i>	Initials <i>UR</i>			

ADDRESS

009629

TITLE

Optical pickup device and focus error detecting method therefor

FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 1762

SERIAL NUMBER 09/944,098	FILING OR 371(c) DATE 09/04/2001 RULE	CLASS 369	GROUP ART UNIT 2655	ATTORNEY DOCKET NO. 041514-5143
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APPLICANTS

Masakazu Ogasawara, Tsurugashima-shi, JAPAN;
 Hajime Koyanagi, Tsurugashima-shi, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and
Acknowledged

Examiner's Signature

Initials

ADDRESS

09629

TITLE

OPTICAL PICKUP DEVICE WITH FOCUS ERROR DETECTING OPTICAL ELEMENT AND METHOD FOR
 FOCUS ERROR DETECTION

FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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